

Capacity/Title: <u>eunee</u>

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned

submits for filing a certificate of Assumed Business Name.

FILED EFFE

D88111

2005 MAY 23 MILE: 03 SiATE CONTRACTOR

Please type or print legibly. NOTE: See instructions on reverse before filing.

Top to Bottom.	
2. The true name(s) and <u>business</u> address(es business under the assumed business name Name Anta McDantel	
3. The general type of business transacted u	nder the assumed business name is:
Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Anthomedale To 83628	Submit Certificate of Assumed Business Name and \$25.00 fee to:
 Name and address for this acknowledgm copy is (if other than # 4 above): 	Phone number (optional): 208 - 337 - 4239
	Secretary of State use only
gnature: Inita Melance (signature required)	1DAHO SECRETARY OF STATE 15/23/2005 05:0 CK: 2263 CT: 189814 BH: 8118 1 0 25.00 = 25.00 ASSUM NAME